## P06000076386

(Requestor's Name)				
(Address)				
(Address)				
(,				
(0) (0) (7) (7)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Boodine (Kumbor)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
· -				
[				

Office Use Only



600074320516

05/12/06--01018--001 \*\*78.75

-06 MAY -5 AH 8: 3 -SECKE JARTOE STAIL

Po

## COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	Pine forest (PROPOSED CORPORA	TENAME-MUST INCL	<u>c.                                    </u>
~	(PROPOSED CORPORA	TE NAME – <u>MUST INCLI</u>	ÛDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Feé & Certificate of Status	\$78.75 Filing Fec & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	andrew to Name	9	
	Hudson Fl	34669 State & Zip	
-	727- 505 Daytime To	- aao6	

NOTE: Please provide the original and one copy of the articles.



May 17, 2006

ANDREW HENNOSSY 10312 STATE RD 52 HUDSON, FL 34669

SUBJECT: PINE FOREST CENTER INC.

Ref. Number: W06000022123

We have received your document for PINE FOREST CENTER INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The registered agent and street address must be consistent wherever it appears in your document.

The registered agent must sign accepting the designation.

You must list at least one incorporator with a complete business street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call 850-245-6062.

Paisley A Alford New Filing Section Division of Corporations

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

Letter Number: 506A00033805

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F	.S. (Profit)
ARTICLE I NAME	
The name of the corporation shall be:	5
Pine woods Center Inc.	EIL SECRETAR TALLAHASS
ARTICLE II PRINCIPAL OFFICE	LED ARY OF STATE SSEE FLORIDA
The principal place of business/mailing address is:	五元 <b>立</b> つ
10312 State Rd 52.	
Hudson, Fl. 34669 ARTICLE III PURPOSE	DE O;
The manage Consulting the commence in the consultant in	
The number of shares of stock is:	he corporation is Organized tivity business permitted State of Florida
1500 Common Shares P	ar Value ?10
ARTICLE V INITIAL OFFICERS AND/OR	DIRECTORS
List name(s), address(es) and specific title(s):	Cannie Honnose
andrew Hennosy 10312 State Road 52	Connie Hennosy 10312 State Road 52
Hudson, F1 34669	Hudson, Fl. 34669
Director President	Director, Secretary, Treasur
The name and Florida street address (P.O. Box NOT a	acceptable) of the registered agent is:
Convie Hennosy 10312 State Road 52	
Hudson, Fl. 34669	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Counie Hennoscy 10312 State Road 52	
Hudson F1 34669	
Having been named as registered agent to accept service of proce certificate, I am familiar with and accept the appointment as registe	
Connie Hennosu Signature/Registered Agent	5/24/0G
Connie Hannou Signature/Incorporator	5/34/06 Date